24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
New York State Conservative Party	C C00282343
Check If 24-hour report 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	Dete
Majority Strategies	Date
Mailing Address 135 Professional Drive	05 17 2011 Amount
City State Zip Code	Amount
Ponte Vedra FL 32082	4719.68 Transaction ID : SE.45946
	e Sought: House State: NY Senate District: 26
Name of Federal Candidate Supported or Opposed by Expenditure:	President
	ck One: Support Oppose
Calendar Year-To-Date Per Election Disbut 2011	ursement For: Primary General Other (specify) Special-General
	✓ Other (specify) Special-General
Full Name (Last, First, Middle Initial) of Payee	Date
	M M / D D / Y Y Y Y
Mailing Address	
	Amount
City State Zip Code	
Purpose of Expenditure Category/ Type	e Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
	ck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	ursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	4719.68
	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	4719.68
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Mr. Gerard J Kassar [Electronically Filed] Date	1 25 2012
Signature	